

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Ehud Dafni : Confirmation No.: 6445

Application No.: 10/599,279 : Group Art Unit: 2882

Filing Date: September 25, 2006

For: **Apparatus And Method Of Improved
Angiographic Imaging**

March 13, 2007

Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Request For Correction of Bibliographic Data

SIR:

Due to a typographical error in the electronic filing transmittal form, the first named inventor's name is incorrect.

Incorrect: Geraldine Gress
Correct: Ehud Dafni

Attached please find:

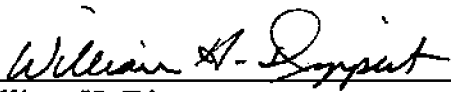
- 1) Transmittal Letter To The United States Designated/Elected Office (DO/EO/US);
- 2) first page of the Preliminary Amendment;
- 3) first page of WO 2005/092187 A1;
- 4) executed Power of Attorney form;
- 5) executed Declaration form

all listing Ehud Dafni as the sole inventor.

Correction of the Bibliographic Data before the Filing Receipt issues is greatly appreciated.

Respectfully submitted,

March 13, 2007


William H. Dippert
Registration No. 26,723

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PTO-1390 (Rev. 07-2005)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A SUBMISSION UNDER 35 U.S.C. 371		ATTORNEY'S DOCKET NUMBER GOL616.239514
INTERNATIONAL APPLICATION NO. PCT/IL2004/000282	INTERNATIONAL FILING DATE 29 March 2004	U.S. APPLICATION NO. (If known, see 37 CFR 1.5) To Be Assigned
TITLE OF INVENTION Apparatus And Method Of Improved Angiographic Imaging		PRIORITY DATE CLAIMED 29 March 2004
APPLICANT(S) FOR DO/EO/US Ehud Dafni		
Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:		
<p>1. <input type="checkbox"/> This is a FIRST submission of items concerning a submission under 35 U.S.C. 371.</p> <p>2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a submission under 35 U.S.C. 371.</p> <p>3. <input type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (21) indicated below.</p> <p>4. <input type="checkbox"/> The US has been elected (Article 31).</p> <p>5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2))</p> <p>a. <input type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau).</p> <p>b. <input type="checkbox"/> has been communicated by the International Bureau.</p> <p>c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US).</p> <p>6. <input type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)).</p> <p>a. <input type="checkbox"/> is attached hereto.</p> <p>b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4).</p> <p>7. <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3))</p> <p>a. <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau).</p> <p>b. <input type="checkbox"/> have been communicated by the International Bureau.</p> <p>c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired.</p> <p>d. <input type="checkbox"/> have not been made and will not be made.</p> <p>8. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).</p> <p>9. <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)).</p> <p>10. <input type="checkbox"/> An English language translation of the annexes of the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)).</p> <p>Items 11 to 20 below concern document(s) or information included:</p> <p>11. <input type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98.</p> <p>12. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.</p> <p>13. <input checked="" type="checkbox"/> A preliminary amendment.</p> <p>14. <input type="checkbox"/> An Application Data Sheet under 37 CFR 1.76.</p> <p>15. <input type="checkbox"/> A substitute specification.</p> <p>16. <input type="checkbox"/> A power of attorney and/or change of address letter.</p> <p>17. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821-1.825.</p> <p>18. <input type="checkbox"/> A second copy of the published International Application under 35 U.S.C. 154(d)(4).</p> <p>19. <input type="checkbox"/> A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).</p>		

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: **Ehud Dafni**
Application Serial No.: **To Be Assigned**
Filing Date: **September 25, 2006, herewith**
For: **Apparatus And Method Of Improved
Angiographic Imaging**

September 25, 2006

Mail Stop: **PCT**
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PRELIMINARY AMENDMENT

SIR:

Prior to examination, please amend the above application by adding page 28 as follows:

(19) World Intellectual Property
Organization
International Bureau



(43) International Publication Date
6 October 2005 (06.10.2005)

PCT

(10) International Publication Number
WO 2005/092187 A1

(51) International Patent Classification⁷: **A61B 5/05**

(21) International Application Number:
PCT/IL2004/000282

(22) International Filing Date: 29 March 2004 (29.03.2004)

(25) Filing Language: English

(26) Publication Language: English

(71) Applicant (for all designated States except US): **CMT
MEDICAL TECHNOLOGIES LTD.** [IL/IL]; MATAM,
Haifa, 31905 (IL).

(72) Inventor; and

(75) Inventor/Applicant (for US only): **DAFNI, Ehud** [IL/IL];
14 Snapir st., Caesarea, 38900 (IL).

(74) Agent: **GOLD - PATENTS & FINANCIAL SERVICES
LTD.** 43, Rubinstein st., Haifa, 34987 (IL).

(81) Designated States (unless otherwise indicated, for every
kind of national protection available): AE, AG, AL, AM,

AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN,
CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI,
GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE,
KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD,
MG, MK, MN, MW, MX, MZ, NA, NI, NO, NZ, OM, PG,
PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM,
TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM,
ZW.

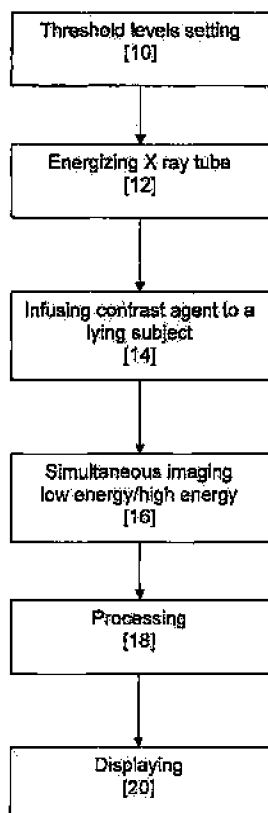
(84) Designated States (unless otherwise indicated, for every
kind of regional protection available): ARIPO (BW, GH,
GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW),
Eurasian (AM, AZ, BY, KG, KZ, MD, RU, TJ, TM), Euro-
pean (AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR,
GB, GR, HU, IE, IT, LU, MC, NL, PL, PT, RO, SE, SI, SK,
TR), OAPI (BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW,
ML, MR, NE, SN, TD, TG).

Published:

— with international search report.

For two-letter codes and other abbreviations, refer to the "Guid-
ance Notes on Codes and Abbreviations" appearing at the begin-
ning of each regular issue of the PCT Gazette.

(54) Title: **APPARATUS AND METHOD OF IMPROVED ANGIOGRAPHIC IMAGING**



(57) Abstract: The x-ray tube is energized (12) and the myocardium is imaged (16) while contrast agent is infused to the coronary arteries of the subject (14). Single photon counting data acquired with the detector while two thresholds are set to form simultaneously low energy images and high energy images (16). The images are processed (18) and displayed (20).

WO 2005/092187 A1

**POWER OF ATTORNEY
 and
 CORRESPONDENCE ADDRESS
 INDICATION FORM**

Application Number	To Be Assigned
Filing Date	September 25, 2006, herewith
First Named Inventor	DAFNI EHUD
Title	APPARATUS AND METHOD OF
An Unk	
Examiner Name	
Attorney Docket Number	GOL616.239514

I hereby appoint:

☒ Practitioners associated with the Customer Number.

054042

OR

☐ Practitioner(s) named below.

Name	Registration Number
William H. Dippert	26,723

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number.

OR

☐ The address associated with Customer Number.

054042

OR

<input type="checkbox"/> Firm or Individual Name	Wolf, Block, Shorr and Solis-Cohen LLP				
Address	250 Park Avenue				
Address	10th Floor				
City	New York	State	New York	Zip	10177
Country	US				
Telephone	212.863.4993	Fax	212.672.1192		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(d) is enclosed. (Form PTO/SB/36)

SIGNATURE of Applicant or Assignee of Record

Name	CMT Medical Technologies LTD. of Habarmel st., Structure 7 building 2, Yokneam Illit, Israel	
Signature	<i>Ehud Dippert</i>	
Date	Sept 16, 2006	Telephone +972 4 8566251

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public, which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number GOL616.239514
		First Named Inventor DAFNI EHUD
COMPLETE IF KNOWN		
		Application Number To Be Assigned
		Filing Date September 25, 2006, herewith
		Art Unit
		Examiner Name

☐ Declaration Submitted With Initial Filing
 OR
☐ Declaration Submitted after Initial Filing (surcharge, (37 CFR 1.16 (e)) required)

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

APPARATUS AND METHOD OF IMPROVED ANGIOGRAPHIC IMAGING

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 03/29/2004 as United States Application Number or PCT International

Application Number CT/IL2004/00282 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> The address associated with Customer Number: 054042		OR: <input type="checkbox"/> Correspondence address below	
Name: William H. Dippert Address: Wolf, Block, Schorr and Solis-Cohen LLP 10th Floor 250 Park Avenue			
City: New York		State: New York	
		ZIP: 10177-0030	
Country: US	Telephone: 212.986.1116	Facsimile: 212.986.0604	
E-Mail: wdippert@wolfblock.com			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Ehud		DAFNI	
Inventor's Signature: <i>Ehud Daff</i>		Date: Sept 16, 2006	
Residence: City	State	Country	Citizenship
Caesarea		Israel	Israeli
Mailing Address			
Snapir st. 14			
City	State	Zip	Country
Caesarea		38900	Israel
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
<input type="checkbox"/> Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB02A or SB02B attached hereto.			